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|--|--|---|--|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b>  |  | Attorney Docket No.: S-100,612  |  |
|  |  | First Inventor or Application Identifier: Betty S. Jorgensen et al.   |  |
|  |  | Title: CROSS-LINKED POLYBENZIMIDAZOLE MEMBRANE FOR GAS SEPARATION   |  |
|  |  | Express Mail Label No.: ET461826515US   |  |
| APPLICATION ELEMENTS   |  | ADDRESS TO: Mail Stop Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450  |  |
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17)<br>(submit an original and a duplicate for fee processing)<br><br>2. <input checked="" type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br><br>3. <input checked="" type="checkbox"/> Specification [Total Pages: 18]<br><input checked="" type="checkbox"/> Descriptive title of the Invention<br><input type="checkbox"/> Cross References to Related Applications<br><input checked="" type="checkbox"/> Statement Regarding Fed sponsored R&D<br><input type="checkbox"/> Reference to sequence listing, a table or a computer program listing appendix<br><input checked="" type="checkbox"/> Background of the Invention<br><input checked="" type="checkbox"/> Brief Description of the Drawings (if filed)<br><input checked="" type="checkbox"/> Detailed Description<br><input checked="" type="checkbox"/> Claim(s)<br><input checked="" type="checkbox"/> Abstract of the Disclosure<br><br>4. <input checked="" type="checkbox"/> Drawings(s) (35 U.S.C. 113) [Total Sheets: 4]<br><input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal<br><br>5. <input checked="" type="checkbox"/> Declaration & Power of Attorney<br>[Total Pages: 2]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 63(d)<br>(for continuation/divisional with Box 16 completed)<br>c. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b). |  | 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br><br>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Copy<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies): or<br>ii. <input type="checkbox"/> paper<br>c. <input type="checkbox"/> Statement verifying identity of above copies |  |
| <b>ACCOMPANYING APPLICATION PARTS</b>  |  |   |  |
| 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documentation)<br>9. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney<br>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations<br>11. <input type="checkbox"/> Preliminary Amendment<br>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)<br>13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)<br>14. <input type="checkbox"/> Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i)<br>15. <input type="checkbox"/> Other:  |  |   |  |
| 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application S.N. ____/____.<br><br>Prior application information: Examiner: _____ Group/Art Unit: _____   |  |   |  |
| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.   |  |   |  |
| <b>16. CORRESPONDENCE ADDRESS</b>  |  |   |  |
| <input type="checkbox"/> Customer Number or Bar Code Label OR <input type="checkbox"/> Correspondence Address Below<br><br>(Insert Customer No. or Attach Bar Code Label here)   |  |   |  |
| Name: Samuel L. Borkowsky<br>Address: Los Alamos National Laboratory<br>LC/IP, MS A187<br>City: Los Alamos State: New Mexico Zip Code 87545<br>Country: United States Telephone: (505) 665-3111 Fax: (505) 665-4424  |  |   |  |
| Name (Print/Type): Samuel L. Borkowsky   |  | Registration No. (Attorney/Agent): 42,346   |  |
| Signature: <i>Samuel L. Borkowsky</i>  |  | Date: June 26, 2003   |  |

 00746 U.S. PTO  
 10/607589

06/26/03

# FEE TRANSMITTAL

## For FY 2003

*Patent fees are subject to annual revision  
(submit an original and a duplicate for fee processing)*

Complete if Known

|                       |                           |
|-----------------------|---------------------------|
| Application Number:   |                           |
| Filing Date:          |                           |
| First Named Inventor: | Betty S. Jorgensen et al. |
| Examiner Name:        |                           |
| Group/Art Unit:       |                           |
| Attorney Docket No.:  | S-100,612                 |

**METHOD OF PAYMENT**

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:  
 Deposit Account Number: **12-2150**  
 Deposit Account Name: Los Alamos National Laboratory  
☒ Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17  
☒ Applicant claims small entity status. See 37 CFR 1.27

**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity Fee | Small Entity Fee | Fee Description        | Fee Paid |
|------------------|------------------|------------------------|----------|
| \$750            | \$375            | Utility filing fee     |          |
| \$750            | \$375            | Reissue filing fee     |          |
| \$160            | \$80             | Provisional filing fee |          |

**SUBTOTAL (1) \$375.00**

**2. EXTRA CLAIM FEES**

| Total Claims | Independent Claims | Multiple Dependent Claims | Extra Claims | Fee from Fee Below | Fee Paid |
|--------------|--------------------|---------------------------|--------------|--------------------|----------|
| 21           | 4                  |                           | 1 X          | \$ 9 =             | \$ 9     |
|              |                    |                           | 1 X          | \$42 =             | \$42     |
|              |                    |                           |              |                    | =        |

*\*\* or number previously paid, if greater; For Reissues, see below*

| Large Entity Fee | Small Entity Fee | Fee Description  |
|------------------|------------------|--|
| \$18             | \$9              | Claims in excess of 20                                     |
| \$84             | \$42             | Independent claims in excess of 3                          |
| \$280            | \$140            | Multiple dependent claim, if not paid.                     |
| \$84             | \$42             | ** Reissue independent claims over original patent         |
| \$18             | \$9              | ** Reissue claims in excess of 20 and over original patent |

**SUBTOTAL (2) \$51**

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

| Large Entity Fee | Small Entity Fee | Fee Description  | Fee Paid |
|------------------|------------------|--|----------|
| \$130            | \$65             | Surcharge – late filing fee or oath                            |          |
| \$50             | \$25             | Surcharge – late provisional filing fee or cover sheet         |          |
| \$2,520          | \$2,520          | For filing a request for reexamination                         |          |
| \$110            | \$55             | Extension for reply within first month                         |          |
| \$410            | \$205            | Extension for reply within second month                        |          |
| \$930            | \$465            | Extension for reply within third month                         |          |
| \$1,450          | \$725            | Extension for reply within fourth month                        |          |
| \$1,970          | \$985            | Extension for reply within fifth month                         |          |
| \$320            | \$160            | Notice of Appeal   |          |
| \$320            | \$160            | Filing a brief in support of an appeal                         |          |
| \$280            | \$140            | Request for oral hearing                                       |          |
| \$110            | \$55             | Petition to revive – unavoidable                               |          |
| \$110            | \$55             | Terminal Disclaimer  |          |
| \$1,300          | \$650            | Petition to revive – unintentional                             |          |
| \$130            | \$130            | Petitions to the Commissioner                                  |          |
| \$ 50            | \$50             | Petitions related to provisional applications                  |          |
| \$ 180           | \$180            | Submission of Information Disclosure Statement                 |          |
| \$750            | \$375            | Filing a submission after final rejection (37 CFR 1.129 (a))   |          |
| \$750            | \$375            | For each additional invention to be examined (37 CFR 1.129(b)) |          |
| \$100            | \$100            | Certificate of Correction                                      |          |
| \$300            | \$300            | Publication fee for early, voluntary, or normal publication    |          |
| \$750            | \$375            | Request for Continued Examination (RCE)                        |          |

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3)****\$-0-**

Reduced by Basic Filing Fee Paid

**SUBTOTAL FROM 1****\$375****SUBTOTAL FROM 2****\$ 51****SUBTOTAL FROM 3****\$-0-****TOTAL AMOUNT OF PAYMENT****\$426****SUBMITTED BY**

Complete (if applicable)

Printed Name: Samuel L. Borkowsky

Reg. No. 42,346

Signature: *Samuel L. Borkowsky*

Date: June 26, 2003

Telephone (505) 665-3111